

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731865

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** THE GARDEN CLUB OF THE HALIFAX COUNTRY, INC.

**Current Principal Place of Business:**

2020 S. PENINSULA DR.  
DAYTONA BEACH, FL 32118 US

**New Principal Place of Business:**

**Current Mailing Address:**

2020 S. PENINSULA DR.  
DAYTONA BEACH, FL 32118 US

**New Mailing Address:**

**FEI Number:** 51-0203846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EUBANK, MARJORIE O  
2020 S. PENINSULA DR.  
DAYTONA BEACH, FL 32118 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: EUBANK, MARJORIE O  
Address: 2020 S, PENINSULA DR.  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: CSD ( ) Delete  
Name: SNELL, JORI  
Address: 427 TRITON RD  
City-St-Zip: ORMOND BEACH, FL 32176

Title: VPD ( ) Delete  
Name: ROSSMEYER, SANDY  
Address: 421 OCEAN SHORE BLVD  
City-St-Zip: ORMOND BEACH, FL 32176

Title: VPD ( ) Delete  
Name: MAYFIELD, STEPHANIE  
Address: 669 JOHN ANDERSON DR  
City-St-Zip: ORMOND BEACH, FL 32176

Title: RSD ( ) Delete  
Name: HAGER, JOAN H  
Address: 2758 S. PENINSULA DR.  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: PD ( ) Delete  
Name: WHITE, BEEBE S  
Address: 353 OAK DR  
City-St-Zip: ORMOND BEACH, FL 32176 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARJORIE O'NEALL EUBANK

TREA

02/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date